

6. Purpose of Purchase : _____

7. Justification : _____

Dated : ___ / ___ / _____

Signature of Indenter : _____

Recommended/Not Recommended (pl. tick any one)

Signature of HoD

(Statuary Approvals by the Competent Authorities)

Budgetary Cost of the Equipment/Machine/Software/Instrument

Sanctioned Grant	Expenditure till date	Balance Available	Funds Available / Not Available

Supdt. (A/A)

Consultant (E&P)

Assistant Registrar

Dy. Registrar

Chairman, IPC*

Director

* If purchase is more than 3 lacs.